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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/552,781	10/12/2005	Nozomu Sahashi	38195.77	2042	
54067 OKADA	7590 09/21/200	9	EXAMINER		
	C/O KEATING & BENNETT, LLP 1800 Alexander Bell Drive			PHONGSVIRAJATI, POONSIN	
SUITE 200	-000		ART UNIT	PAPER NUMBER	
Reston, VA 201			3686		
			NOTIFICATION DATE	DELIVERY MODE	
			09/21/2009	ELECTRONIC	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

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	Application No.	Applicant(s)					
Office Action Commence	10/552,781	SAHASHI, NOZOMU					
Office Action Summary	Examiner	Art Unit					
	SIND PHONGSVIRAJATI	3686					
The MAILING DATE of this communication app Period for Reply	ears on the cover sheet with the c	orrespondence address					
A SHORTENED STATUTORY PERIOD FOR REPLY WHICHEVER IS LONGER, FROM THE MAILING DA - Extensions of time may be available under the provisions of 37 CFR 1.13 after SIX (6) MONTHS from the mailing date of this communication. - If NO period for reply is specified above, the maximum statutory period w - Failure to reply within the set or extended period for reply will, by statute, Any reply received by the Office later than three months after the mailing earned patent term adjustment. See 37 CFR 1.704(b).	ATE OF THIS COMMUNICATION 36(a). In no event, however, may a reply be tim vill apply and will expire SIX (6) MONTHS from cause the application to become ABANDONE	lely filed the mailing date of this communication. (35 U.S.C. § 133).					
Status							
1) Responsive to communication(s) filed on							
	-· action is non-final.						
·	Since this application is in condition for allowance except for formal matters, prosecution as to the merits is						
	closed in accordance with the practice under <i>Ex parte Quayle</i> , 1935 C.D. 11, 453 O.G. 213.						
Disposition of Claims	,						
4)⊠ Claim(s) <u>37-76</u> is/are pending in the application	·						
· · · · · · · · · · · · · · · · · · ·	4a) Of the above claim(s) <u>none</u> is/are withdrawn from consideration.						
5) Claim(s) is/are allowed.							
· _ · · · · · · · · · · · · · · · · · ·							
	6) Claim(s) 37-76 is/are rejected.						
7) Claim(s) is/are objected to.	1 4:						
8) Claim(s) are subject to restriction and/or election requirement.							
Application Papers							
9)☐ The specification is objected to by the Examiner.							
10)☐ The drawing(s) filed on is/are: a)☐ acce	10)☐ The drawing(s) filed on is/are: a)☐ accepted or b)☐ objected to by the Examiner.						
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).							
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).							
11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.							
Priority under 35 U.S.C. § 119							
 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f). a) All b) Some * c) None of: 1. Certified copies of the priority documents have been received. 2. Certified copies of the priority documents have been received in Application No 3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)). * See the attached detailed Office action for a list of the certified copies not received. 							
Attachment(s) 1) Notice of References Cited (PTO-892) 2) Notice of Draftsperson's Patent Drawing Review (PTO-948) 3) Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date 20051012.	4) Interview Summary Paper No(s)/Mail Da 5) Notice of Informal P 6) Other:	ite					

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DETAILED ACTION

Priority

Acknowledgment is made of applicant's claim for foreign priority under 35
 U.S.C. 119(a)-(d). The certified copy has been filed in Application No. 10/552781, filed on 10/12/2005.

Claim Rejections - 35 USC § 103

- 1. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:
 - (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.
- 2. Claims 37- are rejected under 35 U.S.C. 103(a) as being unpatentable over Sloane (US 5,619,991) in view of Nickerson (US 2004/0006496).
- 3. As to Claims 37, 38, 51-52, 63, and 64, Sloane teaches an at-home medical consultation system comprising: a reception server including a function for accepting a request for medical consultation from a patient terminal having a videophone function used by a patient at home, and a function for connecting the patient terminal whose request for medical consultation has been accepted to a doctor terminal having a videophone function (Abstract, col. 1 lines 46-62, col. 3 lines 8-14); and a communication server including a function for providing a bidirectional communication service of video and audio between the connected patient terminal and the doctor

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terminal (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65); wherein the communication server includes a function for setting a virtual nursing room to which is connected the patient terminal used by a person who must be monitored for a deterioration in a condition of the person such that the condition can be confirmed from a nurse terminal or a doctor terminal having a videophone function (col. 4 lines 10-19, col. 8 lines 23-34 and lines 58-65); the reception server includes a function for connecting the patient terminal to the virtual nursing room that has been set upon a request from the patient terminal used by the person who must be monitored, and a function for connecting a requesting terminal to the virtual nursing room that has been set upon a request from a nurse terminal or a doctor terminal having the videophone function terminal (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65); the communication server includes a function for receiving at least video transmitted from the patient terminal connected to the virtual nursing room that has been set and synthesizing the video so as to be displayed side by side at the requesting terminal, and a function for transmitting the synthesized video to the requesting terminal (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65); and the communication server includes a function for providing a bidirectional communication service by video and audio between the patient terminal and the requesting terminal that have been connected (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 23-34 and lines 58-65). But Sloane does not specifically disclose the reception server includes a function for selecting a patient terminal connected to the virtual nursing room that is set based on a location on a

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screen specified by a pointing device at the requesting terminal, and a function for separately connecting the selected patient terminal to the requesting terminal.

Nickerson does teach the reception server including a function for selecting a patient terminal connected to the virtual nursing room that is set based on a location on a screen specified by a pointing device at the requesting terminal, and a function for separately connecting the selected patient terminal to the requesting terminal (Fig. 2 and paragraph 19). It would have been obvious to one of ordinary skill in the art at the time of the invention to have selected a patient's terminal based on the location of the screen for the motivation for diagnosing and treating the patients in the virtual waiting room.

- 4. As to Claim 39, Sloane teaches the at-home medical consultation system according to claim 37, wherein: the patient terminal includes a medical examination sensor arranged to collect data necessary for consulting the patient and includes a function for obtaining the data of the medical examination sensor and transmitting the data to the communication server; and the communication server includes a function for receiving the data of the medical examination sensor transmitted from the patient terminals connected to the virtual nursing room that has been set and synthesizing the data so as to be displayed corresponding to each video of the patient terminals (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65).
- 5. As to **Claim 40**, Sloane teaches the at-home medical consultation system according to claim 38, wherein: the patient terminal includes a medical examination

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sensor for collecting data necessary for consulting the patient and includes a function for obtaining the data of the medical examination sensor and transmitting the data to the communication server; the communication server includes a function for receiving the data of the medical examination sensor transmitted from the patient terminals connected to the virtual nursing room that has been set and transmitting the data to the requesting terminal; and the requesting terminal includes a function for receiving the transmitted data of the medical examination sensor and displaying the data corresponding to each video of the patient terminals (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65).

- 6. As to Claim 43 and 44, Sloane teaches the at-home medical consultation system according to claim 37 or 38, wherein: the reception server includes a function for accepting a request for general broadcast from the requesting terminal; and the communication server includes a function for receiving at least audio transmitted from the requesting terminal whose request for general broadcast has been accepted, and generally broadcasting the audio to the patient terminals connected to the virtual nursing room that has been set (col. 4 lines 23-45).
- 7. As to Claim 45 and 46, Sloane teaches the at-home medical consultation system according to claim 37 or 38, wherein: the communication server includes a function for setting a virtual waiting room to which the patient terminals whose request for medical consultation has been accepted are connected through a multi-point connection (Fig. 1); the reception server includes a function for connecting the patient terminal whose

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request for medical consultation has been accepted to the virtual waiting room that has been set (col. 3 lines 48-60); the communication server includes a function for providing a bidirectional communication service among the connected patient terminals through the multi-point connection (col. 3 lines 48-60). But Sloane does not specifically disclose the reception server includes a function for selecting a callee patient terminal connected to the virtual waiting room that has been set based on a location on a screen specified by a pointing device at the caller patient terminal connected to the virtual waiting room that has been set, and a function for separately connecting the selected callee patient terminal to the caller patient terminal; and the communication server includes a function for providing a communication service by video and audio between the callee patient terminal and the caller patient terminal that have been connected. Nickerson does teach the reception server includes a function for selecting a callee patient terminal connected to the virtual waiting room that has been set based on a location on a screen specified by a pointing device at the caller patient terminal connected to the virtual waiting room that has been set (paragraph 32), and a function for separately connecting the selected callee patient terminal to the caller patient terminal (paragraph 33-34); and the communication server includes a function for providing a communication service by video and audio between the callee patient terminal and the caller patient terminal that have been connected (paragraphs 32-34). It would have been obvious to one of ordinary skill in the art at the time of the invention to have a function for selecting a callee patient terminal connected to the virtual waiting room that has been set based on

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a location on a screen specified by a pointing device at the caller patient terminal connected to the virtual waiting room that has been set, and a function for separately connecting the selected callee patient terminal to the caller patient terminal; and the communication server includes a function for providing a communication service by video and audio between the callee patient terminal and the caller patient terminal that have been connected for the same motivation as claim 37.

- 8. As to **Claim 47 and 48**, Sloane teaches the at-home medical consultation system according to claim 45, wherein the reception server includes a function for connecting the waiting room terminal having a videophone function provided in a waiting room of a hospital to the virtual waiting room that has been set (Fig. 1).
- 9. As to Claim 49 and 50, Sloane teaches the at-home medical consultation system according to claim 37, wherein: the reception server includes a function for displaying a list of patients whose requests for medical consultation have been accepted to a nurse terminal having a videophone function, and a function for separately connecting a patient terminal used by a patient selected from the list of patients displayed at the nurse terminal to the nurse terminal (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65); and the communication server includes a function for providing a bidirectional communication service by video and audio between the patient terminal and the nurse terminal that have been connected (col. 3 lines 39-47, col. 4 lines 10-19, col. 8 lines 48-65).

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10. As to Claim 57 and 58, Sloane teaches the at-home medical consultation system according to claim 37 or 38, wherein the reception server includes a function for receiving a request for medication from the patient terminal, a function for requesting the doctor terminal used by the doctor in charge of the patient whose request for the medication has been accepted to confirm the medication, and a function for delivering a prescription issued by the doctor terminal in response to the request for confirming the medication to a pharmacy terminal used by a pharmacy that offers a home delivery service of medicine (col. 5 lines 17-35, col. 6 lines 47-51, col. 7 lines 15-34).

- 11. As to Claim 59 and 60, Sloane teaches the at-home medical consultation system according to claim 37 or 38, wherein the reception server includes a function for accepting a request for counseling from the patient terminal, a function for receiving counseling from the patient terminal whose request for counseling has been accepted, a function for transmitting the received counseling to the doctor terminal used by the doctor in charge, a function for receiving replies from the doctor terminal in response to the transmitted counseling, and a function for transmitting the received replies to the patient terminal whose request for counseling has been accepted (col.3 lines 48-56, col. 4 lines 3-28).
- 12. As to **Claim 61 and 62**, Sloane teaches the at-home medical consultation system according to claim 37 or 38, wherein the reception server includes a function for accepting a reservation for visit consultation from the patient terminal (col.3 lines 48-56, col. 4 lines 3-28).

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13.

- 14. Claims 41-42 and 55-56 are rejected under 35 U.S.C. 103(a) as being unpatentable over Sloane (US 5,619,991) in view of Nickerson (US 2004/0006496) in further view of official notice.
- 15. As to Claims 41 and 42, the combination of Sloane and Nickerson does not specifically disclose the at-home medical consultation system according to claims 37 and 38, wherein: the reception server includes a function for accepting a request for interrupting the transmission from the patient terminal connected to the virtual nursing room that has been set; and the communication server includes a function for interrupting the transmission of video and audio of the patient terminal whose request for interrupting the transmission has been accepted. However, the Examiner takes official notice that it is well known in the art to interrupt a video and/or audio transmission by request. For example, many video chat programs that comprise audio and video transmission have functions that allow a party to be placed on hold while she/he is away from her/his computer. It would have been obvious to one of ordinary skill in the art at the time of the invention to have interrupted the transmission of video and audio of the patient terminal for the motivation for allowing the patient to be away from his computer terminal.
- 16. As to **Claims 55 and 56**, the combination of Sloane and Nickerson does not specifically disclose the at-home medical consultation system according to claim 51 or

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52, wherein: the reception server includes a function for receiving an emergency notice from the nurse terminal to which the nurse call has been notified, a function for notifying the received emergency notice to the doctor terminal used by a doctor in charge of the patient whose nurse call has been accepted, and a function for automatically connecting the patient terminal whose nurse call has been accepted to the doctor terminal to which the emergency notice has been notified; and the communication server includes a function for providing a bidirectional communication service by video and audio between the patient terminal and the doctor terminal that have been connected. However, receiving emergency notice from a nurse's terminal and also notifying a doctor by way of a doctor's terminal that a emergency call button has been pressed by way of bidirectional communications using both video and audio is well known in the art. For example, a nurse's terminal would be prompted if an emergency call button from a patient is sent; in response to the nurse's acknowledgement, the notification would be sent to a doctor by way of, for example, a doctor's PDA using both audio and video communications for acknowledgment and alert. It would have been obvious to one of ordinary skill in the art at the time of the invention To have notified a doctor to the notice that a nurse has been notified of an emergency call for the same motivation as claim 37.

17. Claims 53-54 are rejected under 35 U.S.C. 103(a) as being unpatentable over Sloane (US 5,619,991) in view of Nickerson (US 2004/0006496) in further view of Harada (US 2002/0111831).

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18. As to Claims 53 and 54, the combination of Sloane and Nickerson does not specifically disclose the at-home medical consultation system according to claims 51 or 52, wherein the patient terminal comprises a nurse call button for transmitting a nurse call to the reception server, and automatically logs into the reception server to transmit the nurse call when the nurse call button is pressed. Harada teaches of a demand call, which calls a nurse to a terminal through a server and communicates and replies to inquires of the patient terminal (paragraph 24-28). It would have been obvious to one of ordinary skill in the art at the time of the invention to have called a nurse when a nurse's call button is pressed for the motivation for servicing their patients (Abstract).

19. As to **Claims 65-76**, claims 65-76 repeat substantially similar limitations to claims 37-64 and are rejected using the same rationale and reasoning.

Conclusion

20. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to SIND PHONGSVIRAJATI whose telephone number is (571) 270-5398. The examiner can normally be reached on Monday - Thursday 8:00am-5:00pm (ET).

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If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Jerry O'Connor can be reached on (571) 272-6787. The fax phone number for the organization where this application or proceeding is assigned is (571) 273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/S. P./ Examiner, Art Unit 3686

14 September 2009

/Gerald J. O'Connor/ Supervisory Patent Examiner Group Art Unit 3686